PART B - FEE(S) TRANSMITTAL

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22195 75	90 06/07/2004			have its own certificat	ial paper, such as an assignme te of mailing or transmission.	ent or formal drawing, must		
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ROCKVILLE, MD	20850	Will Si,	35		170, on the date indicated bei	(Depositor's name)		
		E.	\$			(Signature)		
		ENT& TRADE	EMARE			(Date)		
APPLICATION NO.	FILING DATE	FIF	RST NAMED INVI	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/068,956	02/11/2002		Paul E. Youn	g	PF513P1	2381		
APPLN. TYPE	SMALL ENTITY NO	ISSUE FEE		PUBLICATION FEE \$300	TOTAL FEE(S) DUE	DATE DUE 09/07/2004		
EXAM	IDIED	ART UNIT		CLASS-SUBCLASS	ר .			
	ENNIFER E			435-007100	J			
		1645			·			
 Change of correspondence CFR 1.363). 	e address or indication of "Fe	ee Address" (37		on the patent front page of 3 registered patent a		Genome Sciences		
Address form PTO/SB/1: "Fee Address" indicati	ence address (or Change of C 22) attached. on (or "Fee Address" Indicat or more recent) attached. Use	ion form	agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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Human Genom	e Sciences, Inc	c.	Rockvil1	Le, MD				
	assignee category or catego			· · · · · · · · · · · · · · · · · · ·	corporation or other private gr	oup entity government		
la. The following fee(s) are	enclosed:		Payment of Fee(s)		alaaad			
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Director for Patents is reque	sted to apply the Issue Fee a				issue fee to the application ide	ntified above.		
other than the applicant; interest as shown by the re This collection of informa obtain or retain a benefit application. Confidentialit estimated to take 12 minu completed application for case. Any comments on suggestions for reducing 12313-1450. DO NOT \$22313-1450. DO NOT \$2500.	d Publication Fee (if require a registered attorney or agrords of the United States Pattorney or agrords of the United States or agrords of the States of the United States of th	ed) will not be acceent; or the assignee attent and Trademark 1.311. The informable (and by the USP 22 and 37 CFR 1.14 athering, preparing, all vary depending up require to complete to the Chief Information of Commerce, Ale	or other party in Office. tion is required to TO to process) and the TO to process and the TO to process and submitting the pontion the individuation Officer, U.S.	08/30/2004 01 FC:1501 02 FC:8001 03 FC:1504	EABUBAK2 00000032 0834 1330.00 DA 9.00 DA 300.00 DA	325 10068956		

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PTO/SB/17 (10-03)
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		Complete if Known						
FEE TRANSMITTAL		Application Number			er	10/068,956-Conf. #2381		
for FY 2004		Filing Date				February 11, 2002		
Effective 10/01/2003. Patent fees are subject to annual revision.		First Named Inventor			ntor	Paul E. Young		
Ellective 10/01/2003, Patent lees are subject to allitual revision.		Examiner Name				Jennifer E. Graser		
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				1645		
TOTAL AMOUNT OF PAYMENT (\$) 1,639.00	Attomey Docket No.			cket No	D	PF513P1		
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (continued)		
Check Credit Money Other None	3. ADDITIONAL FEES							
X Deposit Account:								
Deposit	Larg	e Entity	Small	Entity	_			
Account 08-3425	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Description	Fee Paid	
Deposit	1051	130	2051	65	Surchame	- late filing fee or oath	10011111	
Account Name Human Genome Sciences, Inc.					=	- late provisional filing fee or cover		
The Director is authorized to: (check all that apply)	1052	50	2052	25	sheet.	g		
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Englis	h specification	-	
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	-	equest for ex parte reexamination		
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesting Examiner a	publication of SIR prior to action		
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting Examiner a	publication of SIR after		
FEE CALCULATION	1251	110	2251	55		for reply within first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension f	for reply within second month		
Large Entity Small Entity	1253	950	2253	475	Extension f	for reply within third month		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension f	for reply within fourth month		
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension f	for reply within fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451			institute a public use proceeding		
SUBTOTAL (1) (\$) 0.00	1452 1453	110 1,330	2452 2453	55 665		revive – unavoidable revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665		e fee (or reissue)	1,330.00	
Extra Fee from	1502	480	2502	240	Design issu	•	7,000.00	
Total Claims 24 -24** = x = 0.00	1503	640	2503	320	Plant issue			
Independent 4 -4** = x = 0.00	1460	130	1460	130		the Commissioner		
Claims Multiple Dependent =	1807	50	1807	50		fee under 37 CFR 1.17(q)		
Large Entity Small Entity	1806	180	1806	180	Submission	n of Information Disclosure Stmt		
Fee Fee Fee Fee Fee Description	8021	40	8021	40		each patent assignment per		
1202	1809	770	2809	385	Filing a sub	mes number of properties) pmission after final rejection		
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385		dditional invention to be	\vdash	
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	examined (37CFR 1.129(b)) r Continued Examination (RCE)	<u> </u>	
over original patent	1802	900	1802	900		r expedited examination		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1002	900	1802	900	of a design	application fee for early, voluntary, or	 	
and over original patent	Other	fee (spe	cify)	1504		lication; 3 advance copies	309.00	
SUBTOTAL (2) (\$) 0.00	*Redi	uced by E	Basic Fi	ling Fee		SUBTOTAL (3) (\$)	1,639.00	
**or number previously paid, if greater; For Reissues, see above							.,000.00	

SUBMITTED BY			(Complete (if applicable))		
Name (Print/Type) Joseph Sc	chuller	Registration No. (Attorney/Agent)	48,708	Telephone	(301) 354-3931
Signature	Date	August 27, 2004			